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State of Wisconsin
Department of Workforce Development

WORKER'S COMPENSATION
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December 1, 1999

INS 409

To: Worker's Compensation Insurance Carriers
Self-Insured Employers

From: Judy Norman-Nunnery, Administrator
Worker's Compensation Division

Subject: Supplemental Benefits Payments under s. 102.44(1), Wis. Stats.

Form for 1999 Payments. Please submit Form WKC-140, entitled, "Supplemental Payments Reimbursement Request" in duplicate, for reimbursement of 1999 supplemental benefits payments under s. 102.44(1), Wis. Stats. Each insurance company or self-insured employer that made supplemental payments should use a separate form. The form can be viewed by clicking here ([WKC-140](#)) and may be copied if additional pages are needed.

Statutory Changes from 1996. The worker's compensation law was amended to raise the maximum weekly benefit payable from \$125 to \$150. Persons receiving less than the maximum rate for dates of injury prior to January 1, 1976 receive the same percent of \$150 that their compensation rate bears to the maximum rate in effect at the time of their injury. If you did not make this adjustment in 1997, 1998 or 1999, please do so immediately.

Please notify all personnel who handle Wisconsin claims of this process.

If you have any questions, please contact us at (608) 266-1340.

